

## Chapter 6 - Forms

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## Instructions to Generate SCAO Forms

The instructions to generate SCAO forms are designed to follow the SCAO form line by line. Each line from the form is duplicated and appears in italicized print. If information is taken from any juvenile screen to generate the line, the screen name, field name, and any applicable codes are listed next to the line. Notes are provided for those lines that require further information or clarification.

When entering information into the system to generate the form, go through the form, line by line. Then, using these instructions as a guide, check the information on the screen listed next to the line number to ensure that the fields contain up-to-date information. If the information needs to be added or changed, make any necessary entries on the screen.

### ~Forms Generation~

- ◆ **Creating the Form** - After all necessary information has been entered into the event and/or financial screen you may generate the form by entered the form number. For example to generate an "Order of Disposition/Child in Home", insert "17" in the form number request field and press <Enter>. All SCAO forms can be generated from an Event Add. Most orders can also be generated from Financial Order Add or Event Mod screens. Be sure the paper in the printer is loaded at top-of-form before printing out the order.
- ◆ **Modifying the Form** - To modify or reprint existing documents go to the Next Tran line and type "DOC/SUM along with the case number and suffix number then press <Enter>. The system will display all documents associated with this case. Place an "X" next to the document that you want to modify and press <Enter>. The document will be displayed on your screen. You may modify/delete any information that appears on the screen. Remember, the form will print exactly how it appears on the screen. Press <Enter> to save your changes. It is important to remember that any changes you make on this screen will not be made to the event. You should modify the event to match the changes made to the order.

Notice of Hearings and Proof of Service forms are not saved by the system. You must re-create these forms from the Event Screen.

SCAO FORM #	FORM TITLE
12	Proof of Service
28	Notice to Prior Court of Proceedings Affecting Minor
303	Notice of Hearing Termination of Parental Rights
304	Order Terminating Rights of Non-Custodial Parent
309	Order for Adjourment
311	Notice of Hearing to Identify Father and Determine or Terminate His Rights
312	Order Terminating Rights of Father without Release or Consent
314	Notice of Intent to Release or Consent
318	Order Terminating Parental Rights After Release or Consent
319	Order Placing Child (Step-Parent Adoption)
320	Order Placing Child After Consent
321	Order of Adoption
322	Order Committing to Agency/FIA
323	Advice of Rights After Order Terminating Parental Rights
325	Notice to Adopting Parents on Pending or Potential Appeal/Rehearing
326	Order Authorizing Foster Care funding After Release
328	Certificate of Adoptive Information
334	Clerk's Report to Prosecuting Attorney
336	Order to Determine Custody of child temporarily placed for adoption
341	Final Order Allowing Fees and Costs

## Document Summary Screen

The Document Summary screen displays all orders that have been created for a specific case. Orders can be modified, deleted or re-printed from this screen.

### Accessing the Document Summary screen:

From the Transaction Request Screen, enter DOC/SUM along with the case number and suffix number then press <Enter>.

### Juvenile Next Tran Line:

NXT	TRAN	<u>DOC</u>	TYPE	<u>SUM</u>	CASE	NBR	<u>895019</u>	___	PET	<u>00000000</u>	EVT	___	PTY	___
-----	------	------------	------	------------	------	-----	---------------	-----	-----	-----------------	-----	-----	-----	-----

The system will display the following screen.

```
B
```

-	000001	9/01/2003	JC309
-	000002	9/01/2003	JC304
-	000003	9/05/2003	JC321
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
-			
F3 = EXIT	ENTER X TO SELECT	ENTER 4 TO DELETE	PRESS ENTER TO PRINT

```
MB b
```

02/002

Connected to remote server/host OSMSOUTH using port 23 \\SCAO\IN54QLS on Ne05:

Listed in document number order are all of the documents that have been entered on this case. The following are valid transactions that can be completed:

X = Select the document

4 = Delete the document

By entering one of the transactions on the line to the left of the document and pressing <Enter>, the system will either return the document for you to modify/re-print or the document will be deleted.

### Option X - Select

```
B
```

X	000001	9/01/2003	JC309
_	000002	9/01/2003	JC304
_	000003	9/05/2003	JC321
-			
-			
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-			
-			
F3 = EXIT	ENTER X TO SELECT	ENTER 4 TO DELETE	PRESS ENTER TO PRINT

```
MFB b 03/002
```

Connected to remote server/host OSMSOUTH using port 23 \\SCAO\IN54QLS on Ne05:

1. Enter an “X” next to the order that you want to select and press <Enter>. The system will display the order on the screen.

```

In the matter of      ADOPTION CASE TEST
THE COURT FINDS:

1.                    moved for an adjournment of
  presently set on      at      before      .

IT IS ORDERED:

2. This ADOPT HRG      is adjourned to 10/15/2003 at 1100a.m.
   at: LAPEER COUNTY CIRCUIT COURT/FAMILY DIVISION
       LAPEER CTY. COMPLEX  255 CLAY ST.
       LAPEER                MI  48446

FOR THE FOLLOWING REASONS:

F3 = EXIT                                PRESS ENTER TO PRINT

```

2. Make any modifications necessary by using the <Page Up> and <Page Down> keys. If you want to re-print the document, press <Enter>. If you do not want to re-print or save any changes, press <F3>.

### Option 4 - Delete



1. Enter a “4” next to the order that you want to delete and press <Enter>. The system will delete the document.

Approved, SCAO																													
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PROOF OF SERVICE/NON-SERVICE  USE NOTE: This form is not to be used for proof of service of a summons or for publication	CASE NO. PETITION NO.																											
Court address _____ Court telephone no. _____																													
1. In the matter of _____ (name(s), alias(es), DOB) _____ Date of hearing: _____																													
2. I served _____ as follows:																													
<input type="checkbox"/> SERVICE BY MAIL On _____ I served the above papers, copies of which are either attached or were previously filed with the court, on the following person(s) by <input type="checkbox"/> ordinary <input type="checkbox"/> certified <input type="checkbox"/> registered mail, addressed to their last known address(es).																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">ADDRESS</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	NAME	ADDRESS											<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">PLACE OF SERVICE</th> <th style="text-align: center;">DATE AND TIME</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		NAME	PLACE OF SERVICE	DATE AND TIME												
NAME	ADDRESS																												
NAME	PLACE OF SERVICE	DATE AND TIME																											
I declare that this proof of service by mail has been examined by me and that its contents are true to the best of my information, knowledge, and belief.																													
Date _____ Signature _____																													
<input type="checkbox"/> PERSONAL SERVICE Copies of the above papers were served personally by me on the following person(s):																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">PLACE OF SERVICE</th> <th style="text-align: center;">DATE AND TIME</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			NAME	PLACE OF SERVICE	DATE AND TIME																								
NAME	PLACE OF SERVICE	DATE AND TIME																											
I declare that this proof of personal service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.																													
Date _____ Signature _____																													
<input type="checkbox"/> NON-SERVICE After diligent inquiry, I have been unable to find and serve the following person(s):																													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">NAME</th> <th style="text-align: center;">REASON</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>			NAME	REASON																									
NAME	REASON																												
I declare that this proof of non-service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.																													
Date _____ Signature _____																													
JC 12a (6/03) PROOF OF SERVICE/NON-SERVICE <span style="float: right;">MCR 2.107(D), MCR 3.920(H)</span>																													



## Proof of Service/Non-Service 06/03 - JC12 (A or B)

This form can be generated from an event ADD or MOD screen. From the event screen, enter the date of the form and the event code of PSV - Proof of Service or PPS - Personal Proof of Service then enter 12 in the form number requested field.

### Service by Mail

To generate a proof of service form indicating service by mail, an event must be added with an event type of "PSV". Enter 12 in the form number request field and then press <Enter>. The system will display the following screen.

PROOF OF SERVICE INFORMATION SHEET -- SERVICE BY MAIL

DESCRIBE PAPERS BEING SERVED: \_\_\_\_\_

SELECT TYPE OF MAIL SERVICE: ☐ ORDINARY ☐ CERTIFIED ☐ REGISTERED

ADDITIONAL PROFESSIONAL: \_\_\_\_\_

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
<input type="checkbox"/>	00	00000000		SMITH, AARON,	<input type="checkbox"/>	34306	AARDEMA
<input type="checkbox"/>	00	00000000	J01	TEST, JUVENILE,	<input type="checkbox"/>	96212	SMITH
<input type="checkbox"/>	00	00000000	GAL	BROWN, ANGIE,			NO ATTORNEY
<input type="checkbox"/>	00	00000000	INP	INTERESTED PARTY,,			NO ATTORNEY
<input type="checkbox"/>	00	00000000	PA2	CITY ATTORNEY,,			NO ATTORNEY

More...

F3=EXIT--NO PROCESSING      ENTER=PROCESS REQUEST

MA b A 05/001

Connected to remote server/host OSMSOUTH using port 23      \\SCAO\IN54QLS on Ne05:

1. Type a description of the papers being served.
2. Place an "X" next to the type of mail service being used.
3. Place an "X" to the left of the name of the individuals that are being served with the described documents. The minor and minor's attorney are taken from the case screen. All other parties are taken from the party screen.
4. If an attorney or worker name is not listed on the proof of service, enter the bar number associated with that person in the additional professional fields.

Once all information has been entered on the screen, press <Enter> and the proof of service will generate and print.

## Personal Proof of Service

To generate a personal proof of service form, an event must be added with an event type of “PPS”. Enter 12 in the form number request field and then press <Enter>. The system will display the following screen.

PROOF OF SERVICE INFORMATION SHEET -- PERSONAL SERVICE

DESCRIBE PAPERS BEING SERVED:

---

ADDITIONAL PROFESSIONAL: \_\_\_\_\_

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
—	00	00000000		SMITH, AARON,	—	34306	AARDEMA
—	00	00000000	J01	TEST, JUVENILE,	—	96212	SMITH
—	00	00000000	GAL	BROWN, ANGIE,			NO ATTORNEY
—	00	00000000	INP	INTERESTED PARTY,,			NO ATTORNEY
—	00	00000000	PA2	CITY ATTORNEY,,			NO ATTORNEY
							More...

F3=EXIT--NO PROCESSING      ENTER=PROCESS REQUEST

MA b A 05/001

Connected to remote server/host OSMSOUTH using port 23      \\SCAO\IN54QLS on Ne05:

1. Type a description of the papers being served.
2. Place an “X” to the left of the name of the individuals that are being served with the described documents. The minor and minor’s attorney are taken from the case screen. All other parties are taken from the party screen.
3. If an attorney or worker name is not listed on the proof of service, enter the bar number associated with that person in the additional professional fields.

Once all information has been entered on the screen, press <Enter> and the proof of service will generate and print.

Approved, SCAO		Original - Originating court Copies as needed
STATE OF MICHIGAN JUDICIAL CIRCUIT PROBATE COURT COUNTY	NOTICE TO PRIOR COURT OF PROCEEDINGS AFFECTING MINOR(S)	CASE NO.
Court address		Court telephone no.
Name(s) of parent(s)/guardian(s)/plaintiff/defendant	Name(s), alias(es), and dates of birth of minor(s)	
Case no. of other court (if known) _____		
TO: County of _____ <input type="checkbox"/> Court Clerk or Register <input type="checkbox"/> Friend of the Court <input type="checkbox"/> Prosecuting Attorney <input type="checkbox"/> Juvenile Officer		
NOTICE:		
1. <input type="checkbox"/> a. A complaint/petition/motion was filed with this court which affects the minor(s) who are subject to the continuing jurisdiction of your court. A hearing on the complaint/petition/motion is scheduled for  <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;">Date _____</div> <div style="width: 30%;">Time _____</div> <div style="width: 30%;">Location _____</div> </div> <input type="checkbox"/> b. The attached order was entered on _____ Date _____ .		
2. The actions of the court in this matter may supersede part or all of the order(s) previously entered by your court as the best interests of the minor(s) require.		
Date _____	Court clerk/Register/Deputy signature _____	
<div style="border: 1px solid black; display: inline-block; padding: 5px 20px;">CERTIFICATE OF MAILING</div>		
I certify that on this date I mailed a copy of this notice to the prior court by first class mail.		
Date _____	Signature _____	
<div style="border: 1px solid black; height: 100px; width: 100%; position: relative;"> <div style="position: absolute; top: 5px; right: 5px; text-align: center;">Do not write below this line - For court use only</div> </div>		
<div style="display: flex; justify-content: space-between;"> <span>MC 28 (9/97) NOTICE TO PRIOR COURT OF PROCEEDINGS AFFECTING MINOR(S)</span> <span>MCL 712A.2(b)(2); MSA 27.3178(598.2(b)(2)), MCL 712A.3a; MSA 27.3178(598.3a), MCR 3.205, MCR 5.112, MCR 5.927</span> </div>		

## Notice to Prior Court of Proceedings Affecting Minor 09/97 - MC28

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 28 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>  <i>Parent/Guardian Name and Address</i>  NOTE: Case number of the other court must be manually entered.	CASE	Name DOB	
<i>TO: County of _____</i> <input type="checkbox"/> <i>Court Clerk or Register</i> <input type="checkbox"/> <i>Friend of the Court</i> <input type="checkbox"/> <i>Prosecuting Attorney</i> <input type="checkbox"/> <i>Juvenile Officer</i>  NOTE: The system will automatically enter the county name.			
<b>NOTICE</b> 1. <input type="checkbox"/> a. A complaint/petition/motion was filed with this court which affects the minor(s) who are subject to the continuing jurisdiction of your court. A hearing on the complaint / petition / motion is scheduled for _____.  <input type="checkbox"/> b. The attached order was entered on _____.  NOTE: The location comes from the File Maintenance - Places file or Courtroom File.	EVENT FILE MAINT EVENT	Next Hearing Places File Date	
2. <i>The actions of the court in this matter may supersede part or all of the order(s) previously entered by your court as the best interests of the minor(s) require.</i>  NOTE: This line will always print.			
<i>Signature Lines</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION <b>COUNTY</b>	<b>NOTICE OF HEARING</b> <b>TERMINATION OF PARENTAL RIGHTS</b>	<b>FILE NO.</b>

In the matter of \_\_\_\_\_ , adoptee

TO:

**TAKE NOTICE:** On \_\_\_\_\_ at \_\_\_\_\_ m., in the \_\_\_\_\_ courtroom,  
Date Time

---

Building \_\_\_\_\_ Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ,  
before Name \_\_\_\_\_ Title \_\_\_\_\_ a hearing

will be held on the **PETITION TO TERMINATE YOUR PARENTAL RIGHTS**. The law provides that you should be notified of this hearing. If you fail to appear at this hearing **YOUR PARENTAL RIGHTS MAY BE TERMINATED**.

Date \_\_\_\_\_

Attorney name \_\_\_\_\_ Bar no. \_\_\_\_\_

Attorney address \_\_\_\_\_

City, state, zip \_\_\_\_\_ Telephone no. \_\_\_\_\_

Petitioner name \_\_\_\_\_

Address \_\_\_\_\_

City, state, zip \_\_\_\_\_ Telephone no. \_\_\_\_\_

---

Complete this portion if this is to be published.

PUBLISH ABOVE INFORMATION ONLY

Publish 1 time in \_\_\_\_\_

Forward proof of publication to \_\_\_\_\_

Forward statement for publication charges to \_\_\_\_\_

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Do not write below this line - For court use only

PCA 303 (9/97) NOTICE OF HEARING, TERMINATION OF PARENTAL RIGHTS
MCR 5.751, MCR 5.752, MCR 5.753

## Notice of Hearing Termination of Parental Rights 09/97 - PCA303

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 303 in the form number request field at the bottom of the screen and press <Enter>. The following screen will be displayed.

FORMS GENERATION INFORMATION SHEET

ADDITIONAL PROFESSIONAL: \_\_\_\_\_

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
<input type="checkbox"/>	00		BIR	TEST, ADOPTION CASE,,	<input type="checkbox"/>		NO ATTORNEY
<input type="checkbox"/>	00		ADF	ADOPTING FATHER,,	<input type="checkbox"/>		NO WORKER
<input type="checkbox"/>	00		ADP	ADOPTING PARTY,,	<input type="checkbox"/>		NO ATTORNEY

Bottom

ENTER "X" FOR PROOF OF SERVICE: ☐ PERSONAL SERVICE OR ☐ SERVICE BY MAIL

F3=EXIT--NO PROCESSING      ENTER=PROCESS REQUEST

05/026

Connected to remote server/host OSMSOUTH using port 23      \\SCAO\1N54QLS on Ne05:

1. Enter additional professional numbers in the fields provided.
  2. Place an "X" next to the names of the individuals that will be included on the notice of hearing.
  3. Place an "X" next to the appropriate proof of service option to create a proof of service.
- Once all information has been entered, press <Enter>. The system will display the following screen.

The screenshot shows a terminal window with a title bar containing a small icon and the letter 'B'. The window displays a legal notice form with the following text:

TAKE NOTICE: On 10/15/2003 at 1000 a.m.  
at: COURTROOM A  
COURTHOUSE ROOM A  
123 MAIN  
LANSING MI 48999

before LAVAIL E. HULL, JUDGE a hearing will be held  
on the PETITION TO TERMINATE YOUR PARENTAL RIGHTS. The law provides that  
you should be notified of this hearing. If you fail to appear at this  
hearing YOUR PARENTAL RIGHTS MAY BE TERMINATED.

-----  
Date

F3 = EXIT PRESS ENTER TO PRINT

At the bottom of the terminal window, there is a status bar. On the left, it shows a small icon and the letter 'b'. In the center, it says 'Connected to remote server/host OSMSOUTH using port 23'. On the right, it shows the date '13/029' and the path '\\SCAO\1N54QLS on Ne05:'.

Check the screen for errors and enter any additional information that you would like to have appear on the notice of hearing. After all changes have been made, press <Enter>.

NOTE: If you placed an "X" to generate a proof of service, the system will take you through the steps of generating it. Please see JC12 for an explanation of that process.

Approved, SCAO		
STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	ORDER TERMINATING RIGHTS OF NON-CUSTODIAL PARENT	FILE NO.

In the matter of \_\_\_\_\_, adoptee  
Full name of child Date of birth

1. Date of hearing: \_\_\_\_\_ Judge: \_\_\_\_\_ Bar no.

2. A petition has been filed requesting the parental rights of \_\_\_\_\_,   
Name  
 non-custodial parent of the adoptee, be terminated and that an order of adoption be entered.

3. Notice of this hearing has been given or waived as required by law.

4. The court has received evidence on the petition.

THE COURT FINDS that:

5. The non-custodial parent was given proper notice of this hearing.

☐ 6. The parents of the adoptee were divorced \_\_\_\_\_ .  
Date

7. \_\_\_\_\_ is the parent having legal custody of the child.  
Name

8. \_\_\_\_\_ subsequently married the custodial parent on \_\_\_\_\_  
Name Date  
 and petitioned to adopt the child.

9. The non-custodial parent:

☐ has failed to substantially comply with a support order for a period of 2 years or more before the filing of the petition.

☐ having the ability to support or assist in supporting the child, has failed or neglected to provide regular or substantial support for the child for a period of 2 years or more before the filing of the petition.

10. The non-custodial parent having the ability to visit, contact, or communicate with the child, has regularly and substantially failed or neglected to do so for a period of 2 years or more before the filing of the petition.

IT IS ORDERED:

11. The parental rights of \_\_\_\_\_ are terminated.  
Name

Date \_\_\_\_\_

Judge \_\_\_\_\_

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Do not write below this line - For court use only

PCA 304 (9/00) ORDER TERMINATING RIGHTS OF NON-CUSTODIAL PARENT

MCL 710.51; MSA 21.3178(555.51), MCR 5.751, MCR 5.752



## Order Terminating Rights of Non-Custodial Parent 09/97 - PCA304

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 304 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
1. <i>Date of hearing:</i> <i>Judge:</i>	EVENT	Date Jurist	
<i>NOTE: Lines 2-11 will always print to be manually entered by the user.</i>			
<i>Signature Lines</i>			

[illegible]

## Order for Adjournment 09/01 - MC309

This order can be generated from an event ADD or MOD. From the event screen, enter the date the hearing took place, the event type code and all data for the form. Enter 309 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name, DOB	
<b><i>THE COURT FINDS:</i></b> 1. _____ moved for an adjournment of <input type="checkbox"/> trial <input type="checkbox"/> hearing <input type="checkbox"/> _____ presently set on _____ at _____ before _____.  NOTE: This line will always print.			
<b><i>IT IS ORDERED:</i></b> 2. This <input type="checkbox"/> trial <input type="checkbox"/> hearing <input type="checkbox"/> _____ is adjourned to _____ for the following reasons:  NOTE: The location will be printed from the File Maintenance , places or courtroom file.	FIN ORDER EVENT	Cost Type Date	RST
<i>Signature Line</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY</b>	<b>NOTICE OF HEARING TO IDENTIFY FATHER AND DETERMINE OR TERMINATE HIS RIGHTS</b>	<b>FILE NO.</b>

In the matter of \_\_\_\_\_ , adoptee

TO:

**TAKE NOTICE:** On \_\_\_\_\_ at \_\_\_\_\_ m., in the \_\_\_\_\_ courtroom,  
Date Time

Building \_\_\_\_\_ Street address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
before \_\_\_\_\_ Name \_\_\_\_\_ Title \_\_\_\_\_ a hearing  
will be held to determine the identity of the father of the above named child who was born \_\_\_\_\_ Date \_\_\_\_\_  
at \_\_\_\_\_ City, county, and state \_\_\_\_\_ to \_\_\_\_\_ Mother's name \_\_\_\_\_

who has:    ☐ signed or intends to sign a release or consent relinquishing permanently her parental rights to the child.  
☐ joined with her husband in a petition for adoption.

At the hearing the rights of the father shall be determined or terminated. **YOUR FAILURE TO APPEAR AT THIS HEARING SHALL CONSTITUTE A DENIAL OF YOUR INTEREST IN THE CUSTODY OF THE CHILD, WHICH SHALL RESULT IN THE COURT'S TERMINATION OF YOUR PARENTAL RIGHTS TO THE CHILD.**

Attorney name and bar no./Agency/Michigan Family Independence Agency \_\_\_\_\_  
  
 Address \_\_\_\_\_  
  
 City, state, zip \_\_\_\_\_ Telephone no. \_\_\_\_\_

Date \_\_\_\_\_  
  
 Deputy clerk \_\_\_\_\_

---

Do not write below this line - For court use only

PCA 311 (9/98) NOTICE OF HEARING TO IDENTIFY FATHER AND DETERMINE OR TERMINATE HIS RIGHTS
MCR 5.751, MCR 5.752, MCR 5.753

## Notice of Hearing To Identify Father and Determine or Terminate His Rights 09/98 - PCA311

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 311 in the form number request field at the bottom of the screen and press <Enter>. The following screen will be displayed.

FORMS GENERATION INFORMATION SHEET

ADDITIONAL PROFESSIONAL: \_\_\_\_\_

ENTER "X" TO SELECT PARTIES AND/OR THEIR ATTORNEYS:

"X"	SFX	PETITION	CODE	PARTY NAME	"X"	ATY/WKR	NAME
<input type="checkbox"/>	00		BIR	TEST, ADOPTION CASE,,			NO ATTORNEY
<input type="checkbox"/>	00		ADF	ADOPTING FATHER,,			NO WORKER
<input type="checkbox"/>	00		ADP	ADOPTING PARTY,,			NO ATTORNEY

Bottom

ENTER "X" FOR PROOF OF SERVICE: ☐ PERSONAL SERVICE OR ☐ SERVICE BY MAIL

F3=EXIT--NO PROCESSING      ENTER=PROCESS REQUEST

05/026

Connected to remote server/host OSMSOUTH using port 23      \\SCAO\1N54QLS on Ne05:

1. Enter additional professional numbers in the fields provided.
  2. Place an "X" next to the names of the individuals that will be included on the notice of hearing.
  3. Place an "X" next to the appropriate proof of service option to create a proof of service.
- Once all information has been entered, press <Enter>. The system will display the following screen.

TAKE NOTICE: On 10/15/2003 at 1000 a.m.  
before JUDGE LAVAIL E. HULL

at: COURTROOM A  
COURTHOUSE ROOM A  
123 MAIN  
LANSING MI 48999

A hearing will be held to determine the identity of the father of the  
above named child who was born  
at , County,  
to who has:  
{ } signed or intends to sign a release or consent relinquishing  
permanently her parental rights to the child.  
{ } joined with her husband in a petition for adoption.

F3 = EXIT PRESS ENTER TO PRINT

MA b 01/002  
Connected to remote server/host OSMSOUTH using port 23 \\SCAO\1N54QLS on Ne05:

Check the screen for errors and enter any additional information that you would like to have appear on the notice of hearing. After all changes have been made, press <Enter>.

NOTE: If you placed an "X" to generate a proof of service, the system will take you through the steps of generating it. Please see JC12 for an explanation of that process.

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER TERMINATING RIGHTS OF FATHER          WITHOUT RELEASE OR CONSENT</b>	<b>FILE NO.</b>

In the matter of \_\_\_\_\_, adoptee  
Full name of child Date of birth

1. Date of hearing: \_\_\_\_\_ Judge: \_\_\_\_\_ Bar no.

2. A petition has been filed to determine the identity of the father and to determine or terminate his parental rights to the above named child, born out of wedlock on \_\_\_\_\_ to \_\_\_\_\_  
Date Mother

☐ who has executed or proposes to execute a release or consent relinquishing her parental rights to the child.  
☐ who has joined with her husband in a petition for adoption.

3. Notice of this hearing has been given or waived as required by law.

4. The court has received evidence as to the identity and whereabouts of the father.

**THE COURT FINDS that:** (If identity of father is known, check 5. If father is not known, check 7.)

☐ 5. The father of the child, born out of wedlock, is \_\_\_\_\_. He:  
(check one)

☐ a. submitted a verified affirmation of his paternity and a denial of his interest in custody of the child.

☐ b. filed a disclaimer of paternity.

☐ c. was served with a notice of intent to release or consent at least 30 days before the expected date of confinement specified in that notice but failed to file an intent to claim paternity either before the expected date of confinement or before the birth of the child.

☐ d. was given proper notice of this hearing and: ☐ failed to appear ☐ appeared and denied his interest in the custody of the child.

☐ e. cannot be located after reasonable effort was made. He has not provided support for the mother, has not shown any interest in the child, and has not made provision for the child's care for at least 90 days preceding this hearing.

☐ f. appeared and requested custody of the child. The father has not established any custodial relationship with the child or did not provide any support or care for the mother during pregnancy or for either mother or child after the child's birth. The court inquired into the fitness and the ability of the father to properly care for the child. It would not be in the best interest of the child to grant custody to the father.

☐ 6. The mother was married to \_\_\_\_\_ for part or all of the time from the conception to the date of birth of the child. He is not the father of the child.

☐ 7. The identity of the father cannot be determined after reasonable effort was made. He has not made provision for the child's care and did not provide support for the mother during her pregnancy or during her confinement.

**IT IS ORDERED** that the parental rights of \_\_\_\_\_ are terminated.

\_\_\_\_\_  
Date
\_\_\_\_\_  
Judge

---

Do not write below this line - For court use only

MCL 710.36; MSA 21.3178(555.35)

**PCA 312 (9/97) ORDER TERMINATING RIGHTS OF FATHER WITHOUT RELEASE OR CONSENT**

## Order Terminating Rights of Father Without Release or Consent 09/97 - PCA312

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 312 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>1. Date of Hearing: _____ Judge: _____</i>	EVENT	Date Jurist	
<i>Signature Line</i>			



Approved, SCAO	
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>NOTICE OF INTENT TO RELEASE OR CONSENT</b>
<div style="float: right; text-align: right;">FILE NO.</div>	
<i>PERSONAL SERVICE OF PCA 314 IS REQUIRED 30 DAYS PRIOR TO EXPECTED DATE OF CONFINEMENT</i>	
In the matter of _____ <div style="text-align: center; margin-left: 100px;">Petitioner</div>	
<b>TO:</b> <div style="display: flex; justify-content: space-between; height: 100px;"> <div style="border-left: 1px solid black; width: 45%;"></div> <div style="border-left: 1px solid black; width: 45%;"></div> </div>	
<b>TAKE NOTICE:</b> The above named woman has filed an ex parte petition with this court which alleges that:	
1. She is pregnant out of wedlock and intends to release the expected child for adoption or to consent to the child's adoption.	
2. The approximate date of conception was _____ at the following location: _____	
3. Her expected date of confinement is _____.	
4. You are the putative father of the expected child.	
<b>YOU ARE NOTIFIED AND INFORMED:</b>	
5. You have a right to file a notice of intent to claim paternity before the birth of the child with the family division of the circuit court in any county of this state on a form available at this court.	
6. If you file a notice of intent to claim paternity, you shall be entitled to notice of any hearing involving that child to determine the identity of the father of the child and any hearing to determine or terminate his paternal rights to this child.	
7. <b>YOUR FAILURE TO FILE</b> a notice of intent to claim paternity before the expected date of confinement or before the birth of the child, whichever is later, is a waiver of your right to receive notice of the hearing and is a denial of your interest in custody of the child, which <b>WILL RESULT IN THE COURT'S TERMINATION OF YOUR RIGHTS TO THE CHILD.</b>	
Date _____	Deputy clerk _____
<div style="border: 1px solid black; display: inline-block; padding: 2px 10px;"><b>PROOF OF PERSONAL SERVICE</b></div>	
On _____ at _____ m. I personally served a copy of this notice on <div style="display: flex; justify-content: space-between;"> <div>Date</div> <div>Time</div> </div>	
_____ at _____ <div style="display: flex; justify-content: space-between;"> <div>Name</div> <div>Location</div> </div>	
I declare that this proof of service has been examined by me and that its contents are true to the best of my information, knowledge, and belief.	
Date _____	Signature of peace officer/court authorized person _____
Do not write below this line - For court use only	
<div style="display: flex; justify-content: space-between;"> <div>PCA 314 (9/98) <b>NOTICE OF INTENT TO RELEASE OR CONSENT</b></div> <div>MCL 710.34; MSA 27.3178(555.34), MCR 5.751, MCR 5.752</div> </div>	

## Notice of Intent to Release or Consent 09/98 - PCA314

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 10 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>TO:</i>  NOTE: This line will always print to be manually entered by the user.			
<b>TAKE NOTICE:</b> <i>The above named woman has filed an ex parte petition with this court which alleges that:</i>  NOTE: This line will always print.			
<i>NOTE: Lines 1 - 7 will always print to be manually entered by the user.</i>			
<i>Signature Lines</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER TERMINATING PARENTAL RIGHTS          AFTER RELEASE OR CONSENT</b>	<b>FILE NO.</b>
In the matter of _____ DOB: _____, adoptee <small>Full name of child</small>		
1. Date of hearing: _____ Judge: _____ Bar no.		
<b>THE COURT FINDS:</b>		
<input type="checkbox"/> 2. A release of the child has been executed according to law by _____ <small>Name(s)</small>		
<input type="checkbox"/> 3. The consent to the adoption is genuine and is given by the person(s) having legal authority to sign the consent and the best interests of the adoptee will be served by the adoption.		
<b>IT IS ORDERED:</b>		
4. The parental rights of _____ are terminated. <small>Name(s)</small>		
Date _____	Judge _____	
Do not write below this line - For court use only		
<div style="text-align: right; font-size: small;">MCL 710.29(7); MSA 27.3178(555.29)(7), MCL 710.55(1); MSA 27.3178(555.55)(1)</div> <b>PCA 318 (9/98) ORDER TERMINATING PARENTAL RIGHTS AFTER RELEASE OR CONSENT</b>		

## Order Terminating Parental Rights after Release or Consent 09/98 - PCA318

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 318 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>1. Date of hearing: Judge/Referee:</i>	EVENT	Date/Jurist	
<b><i>NOTE: Lines 2-4 will always print to be manually entered by the user.</i></b>			
<i>Signature Lines</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER PLACING CHILD</b> <b>(STEP-PARENT ADOPTION)</b>	<b>FILE NO.</b>
In the matter of _____, adoptee <small style="display: inline-block; width: 40%; text-align: center;">Full name of child</small> <small style="display: inline-block; width: 40%; text-align: center;">Date of birth</small>		
1. Date of hearing: _____ Judge: _____ Bar no. _____		
<b>THE COURT FINDS:</b>		
2. A petition for an order of adoption has been filed.		
3. A report of investigation has been filed and review by the court.		
4. The best interests of the adoptee will be served by the adoption.		
5. The petitioner for adoption is married to the parent having legal custody of the adoptee.		
<b>IT IS ORDERED:</b>		
6. Placement of the adoptee in the home of _____, is approved. <small style="display: inline-block; width: 40%; text-align: center;">Name(s)</small>		
<input type="checkbox"/> 7. _____ shall supervise the adoptee in the home and <small style="display: inline-block; width: 40%; text-align: center;">Court agent or employee, child placing agency, or Michigan Family Independence Agency</small> shall make reports to the court regarding the adjustment of the adoptee in the home every _____ months.		
<div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Date _____</div> <div>Judge _____</div> </div>		
<hr style="border: 0.5px solid black;"/> Do not write below this line - For court use only		
<div style="display: flex; justify-content: space-between;"> <div> <b>PCA 319 (9/97) ORDER PLACING CHILD (STEP-PARENT ADOPTION)</b> </div> <div style="text-align: right;"> <small>MCL 710.51; MSA 21.3178(555.51), MCL 710.52; MSA 27.3178(555.52)</small> </div> </div>		

## Order Placing Child (Step-parent Adoption) 09/97 - PCA319

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 319 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
1. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
<b>NOTE: Lines 2-7 will always print to be manually entered by the user.</b>			
<i>Signature Lines</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER PLACING CHILD AFTER CONSENT</b>	<b>FILE NO.</b>
<p>In the matter of _____ DOB: _____, adoptee  <small>Full name of child</small></p> <p>1. Date of hearing: _____ Judge: _____ Bar no. _____</p> <p><b>THE COURT FINDS:</b></p> <p>2. A petition for an order of adoption has been filed.</p> <p>3. A report of investigation has been filed and reviewed by the court.</p> <p>4. The best interests of the adoptee will be served by the adoption.</p> <p>5. The rights of both parents or the person in loco parentis have been terminated.</p> <p><b>IT IS ORDERED:</b></p> <p>6. The adoptee is made a ward of this court for purposes of adoption and placement in the home of the adoptive parents, _____, is approved.  <small>Name(s)</small></p> <p>7. _____ shall supervise the adoptee in the home and  <small>Court agent or employee, child placing agency or Michigan Family Independence Agency</small>          shall make reports to the court regarding the adjustment of the adoptee in the home every _____ months.</p> <p>8. The adoptive parent(s) may consent to all medical, surgical, dental, optical, psychological, educational, and related services for the adoptee.</p> <p style="margin-top: 40px;">Date _____ Judge _____</p>		
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Do not write below this line - For court use only		
<div style="display: flex; justify-content: space-between;"> <span>PCA 320 (9/97) <b>ORDER PLACING CHILD AFTER CONSENT</b></span> <span>MCL 710.51; MSA 27.3178(555.51), MCL 710.52; MSA 27.3178(555.52)</span> </div>		

## Order Placing Child after Consent 09/97 - PCA320

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 320 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>I. Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
<b>NOTE: Lines 2-7 will always print to be manually entered by the user.</b>			
<i>Signature Lines</i>			



Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER OF ADOPTION</b>	<b>FILE NO.</b>
In the matter of _____ DOB: _____, adoptee		
<b>THE COURT FINDS:</b>		
1. A petition for an order of adoption has been filed.		
2. All necessary orders terminating parental rights have been entered.		
3. The adoptee <input type="checkbox"/> was _____ made a ward of this court. <input type="checkbox"/> was not		
4. The adoption of the adoptee by petitioner(s) is desirable and in the best interest of the adoptee.		
<b>IT IS ORDERED:</b>		
5. From and after this date the parent(s) of the adoptee is/are:		
_____ and _____ <small>Name Name</small>		
6. The name of the adoptee is _____.		
7. The adoptee, if a ward of this court, is discharged.		
<div style="display: flex; justify-content: space-between; margin-top: 100px;"> <div style="width: 30%;">Date _____</div> <div style="width: 40%;">Judge _____</div> <div style="width: 30%;">Bar no. _____</div> </div>		
Do not write below this line - For court use only		
<div style="display: flex; justify-content: space-between;"> <div>PCA 321 (9/98) <b>ORDER OF ADOPTION</b></div> <div>MCL 710.56; MSA 27.3178(555.56), MCL 710.60; MSA 27.3178(555.60)</div> </div>		

## Order Of Adoption 09/98 - PCA321

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 321 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of _____ DOB: _____</i>	CASE	Name DOB	
<b>THE COURT FINDS</b>			
1. <i>A petition for an order of adoption has been filed.</i>  NOTE: This line will always print.			
2. <i>All necessary orders terminating parental rights have been entered.</i>  NOTE: This line will always print.			
3. <i>The adoptee <input type="checkbox"/> was <input type="checkbox"/> was not made a ward of this court.</i>  NOTE: This line will always print.			
4. <i>The adoption of the adoptee by petitioner(s) is desirable and in the best interest of the adoptee.</i>  NOTE: This line will always print.			
<b>IT IS ORDERED:</b>			
5. <i>From and after this date the parent(s) of the adoption is/are: _____.</i>	PARTY	Party Type Name	ADF/ADM ADG/ADP
6. <i>The name of the adoptee is (name).</i>	PARTY	Party Type Name	ADN
7. <i>The adoptee, if a ward of this court, is discharged.</i>  NOTE: This line will always print.			
<i>Signature Line</i>			

Approved, SCAO _____		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER COMMITTING TO AGENCY/          FAMILY INDEPENDENCE AGENCY</b>	<b>FILE NO.</b> _____
In the matter of _____ DOB: _____ <small>Full name of child</small>		
1. Date of hearing: _____ Judge: _____ Bar no. _____		
<b>THE COURT FINDS:</b>		
2. The parental rights of		
Name _____	Relationship _____	
Name _____	Relationship _____	
have been terminated.		
3. It is reasonable not to make efforts to prevent removal of the child or to reunify the family.		
<b>IT IS ORDERED:</b>		
4. The above named child is committed to:		
_____ for the purpose of adoption. <small>Child placing agency /Michigan Family Independence Agency under MCL 710.29(7)</small>		
Date _____	Judge _____	
<hr style="border-top: 3px double #000;"/> Do not write below this line - For court use only		
<b>PCA 322 (9/97) ORDER COMMITTING TO AGENCY/FAMILY INDEPENDENCE AGENCY MCL 710.29(7); MSA 27.3178(555.29)(7)</b>		

## Order Committing to Agency/FIA 09/97 - PCA322

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 322 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of _____ DOB: _____</i>	CASE	Name DOB	
1. <i>Date of Hearing: _____ Judge: _____</i>	EVENT	Date Judge	
2. <i>The parental rights of : _____ have been terminated.</i>	EVENT	Comment	Enter Party Type of person this is for. F01, M01, PTS
3. <i>It is reasonable not to make efforts to prevent removal of this child or to reunify the family.</i>  NOTE: This line will always print.			
<b>IT IS ORDERED:</b> 4. <i>The above named child is committed to: _____ for the purpose of adoption.</i>  NOTE: This line will always print.			
<i>Signature Lines</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ADVICE OF RIGHTS AFTER          ORDER TERMINATING PARENTAL RIGHTS          (Adoption Code)</b>	<b>FILE NO.</b>
<p>In the matter of _____ Date of birth _____</p> <p>1. On _____ an order was entered terminating your parental rights to the above named          Date          child(ren).</p> <p>2. <b>You have the right to:</b></p> <p style="margin-left: 40px;">a. Request a rehearing in the circuit court on the termination of your parental rights. If you choose to request a rehearing, you must do so by contacting this court in writing within 21 days of the date of the order terminating your parental rights.</p> <p style="margin-left: 40px;">b. Appeal to the Court of Appeals the termination of your parental rights or the denial of your request to revoke release/consent of parental rights. If you wish to appeal this termination or denial, you must do so by filing a claim of appeal with the Court of Appeals of the State of Michigan within 21 days of the date of the order terminating your parental rights or the order denying revocation of release/consent.</p> <p>3. <b>In addition to the above rights</b> you have the right to control the release of identifying information about yourself as follows:</p> <p style="margin-left: 40px;">a. You may file with the Central Adoption Registry of the Michigan Family Independence Agency, at any time, a form called "Parent's Consent/Denial to Release Information to Adult Adoptee". With this form (copies available at all circuit courts or Michigan Family Independence Agency offices) you can consent to or deny the release of the following identifying information. You can use this form any time you change your mind about consenting to or denying the release of identifying information.</p> <ul style="list-style-type: none"> <li>• your name at the time of termination of your parental rights</li> <li>• your most recent name and address which is on file with the Central Adoption Registry</li> </ul> <p style="margin-left: 40px;">b. You may keep your name and address current with the Central Adoption Registry by sending this information to them in writing.</p> <p><b>NOTE:</b> If you do not file a "Parent's Consent/Denial to Release Information to Adult Adoptee", or if you revoke a previously filed denial, then the identifying information stated in item 3 will be released upon request of each child after reaching the age of 18. If the other former parent has filed a denial of release of identifying information which has not been revoked, the identifying information about that parent will not be released.</p>		
<hr/> Do not write below this line - For court use only		
<small>MCL 710.27; MSA 27.3178(555.27), MCL 710.29; MSA 27.3178(555.29), MCL 710.64; MSA 27.3178(555.64),          MCL 710.65; MSA 27.3178(555.65), MCL 710.68; MSA 27.3178(555.68)</small>		
<b>PCA 323 (9/98) ADVICE OF RIGHTS AFTER ORDER TERMINATING PARENTAL RIGHTS (Adoption Code)</b>		

## Advice of Rights after Order Terminating Parental Rights 09/98 - PCA323

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 323 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>I. On _____ an order was entered terminating your parental rights to the above named child(ren).</i>	EVENT	Date	
<i>NOTE: Lines 2-3 will always print.</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>NOTICE TO ADOPTING PARENTS ON          PENDING OR POTENTIAL          APPEAL/REHEARING</b>	<b>FILE NO.</b>
In the matter of _____, adoptee <small>Full name of child</small>		
TO: _____		
1. This notice is being given to you, the adopting parents, because this child is being placed with you: <input type="checkbox"/> before the period specified for filing a petition for rehearing or claim of appeal has expired. <input type="checkbox"/> while a decision on a petition for rehearing or appeal as of right is pending.		
2. You are notified that if a petition for rehearing or claim of appeal is or has been filed, an adoption will not be ordered until one of the following occurs: a. the petition for rehearing is granted, and at the rehearing the order terminating parental rights is not modified or set aside, and subsequently the period for appeal as of right to the Court of Appeals has expired without an appeal being filed. b. The petition for rehearing is denied and the period for appeal as of right to the Court of Appeals has expired without an appeal being filed. c. There is a decision of the Court of Appeals affirming the order terminating parental rights, the time to seek a rehearing in the Court of Appeals has expired, no rehearing or motion for rehearing is pending in the Court of Appeals, and either of the following apply: i. the time for appeal to the Supreme Court has expired and no appeal is pending. ii. the Supreme Court has affirmed the decision of the Court of Appeals or has denied leave to appeal, the time to seek a rehearing in the Supreme Court has expired, and no rehearing or motion for rehearing is pending in the Supreme Court.		
3. You are advised that if the appeal or rehearing results in the order terminating parental rights being set aside, any orders entered that resulted in the placement with you shall be cancelled.		
<div style="border: 1px solid black; display: inline-block; padding: 5px 10px;"><b>CERTIFICATE OF SERVICE</b></div>		
I certify that on this date a copy of this notice was served on the adopting parents <input type="checkbox"/> personally. <input type="checkbox"/> by first class mail.		
Date _____	Signature of agent/Family Independence Agency representative/deputy clerk _____ Name (type or print) _____ Name of agency/Family Independence Agency/court _____	
Do not write below this line - For court use only		
<hr/>		

PCA 325 (7/03) **NOTICE TO ADOPTING PARENTS ON PENDING OR POTENTIAL APPEAL/REHEARING**
MCL 710.41

**Notice to Adopting Parents on Pending or  
Potential Appeal/Hearing  
07/03 - PCA 325**

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 325 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>TO:</i>			
NOTE: This line will always print.			
<i>NOTE: Lines 1-3 will always print.</i>			
<i>Signature Lines</i>			



Approved, SCAO _____		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER AUTHORIZING FOSTER CARE FUNDING AFTER RELEASE</b>	<b>FILE NO.</b>
<p>In the matter of _____ DOB: _____, adoptee  <small>Full name of child</small></p> <p>1. Date of hearing: _____ Judge: _____ <small>Bar no.</small></p> <p>2. After release and termination of parental rights, an order was entered on _____ committing  <small>Date</small>          the child to the child placing agency.</p> <p><b>IT IS ORDERED:</b></p> <p>3. Foster care funding for the child is authorized and shall be paid to _____          beginning _____ until expiration of the period of appeal or rehearing or disposition of any appeal or  <small>Date</small>          rehearing. The costs of foster care shall exclude the costs of the child placing agency and shall be paid from the Child Care Fund.</p> <p>4. The Michigan Family Independence Agency shall reimburse monthly the Child Care Fund of this court in the total amount of          the court ordered payment.</p> <p style="margin-top: 40px;">Date _____ Judge _____</p>		
<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Do not write below this line - For court use only		
<div style="display: flex; justify-content: space-between;"> <span>PCA 326 (9/97) <b>ORDER AUTHORIZING FOSTER CARE FUNDING AFTER RELEASE</b></span> <span>MCL 710.29; MSA 27.3178(555.29)</span> </div>		

## Order Authorizing Foster Care Funding After Release 09/97 - PCA326

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 326 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>1. Date of Hearing:_____ Judge:_____</i>	EVENT	DATE Jurist	
<i>NOTE: Lines 2-4 will always print to be manually entered by the user.</i>			
<i>Signature Line</i>			

Approved, SCAO  <b>STATE OF MICHIGAN</b> <b>JUDICIAL CIRCUIT - FAMILY DIVISION</b> <b>COUNTY</b>	<b>CERTIFICATE OF ADOPTIVE INFORMATION</b>	Original - Court Copy - Secretary of Interior  <b>CASE NO.</b>
--	--	---

  

1. In the matter of  
 (name(s), alias(es), DOB) \_\_\_\_\_
  
2. The tribal affiliation of the child is \_\_\_\_\_.
  
3. The names and addresses of the natural parents of the child are:
 

Name of natural father (type or print) _____	Name of natural mother (type or print) _____
Address _____	Address _____
City, state, and zip _____	City, state, and zip _____
  
4. The names and addresses of the adoptive parents of the child are:
 

Name of adoptive father (type or print) _____	Name of adoptive mother (type or print) _____
Address _____	Address _____
City, state, and zip _____	City, state, and zip _____
  
5. The name of the agency having information pertaining to the adoption is \_\_\_\_\_  
 \_\_\_\_\_.
  
  

Date \_\_\_\_\_  
 Signature \_\_\_\_\_

  
  

Do not write below this line - For court use only

  
  

PCA 328 (9/97) **CERTIFICATE OF ADOPTIVE INFORMATION**
25 USC 1951

## Certificate of Adoptive Information 09/97 - PCA328

This form can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 328 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
<i>NOTE: Line 2 - 5 will always print.</i>			
<i>Signature Line</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>CLERK'S REPORT TO PROSECUTING ATTORNEY</b>	<b>FILE NO.</b>
<p>In the matter of _____ DOB: _____ <small>Full name of child</small></p> <p><b>NOTICE TO PROSECUTING ATTORNEY:</b></p> <p>1. The above named child was temporarily placed with prospective adoptive parents for purposes of adoption as indicated in the attached statement (attach Form PCA 330 or PCA 331).</p> <p>2. According to court records, no petition for adoption has been filed and the child has not been returned to the parent(s) or other person having the right to legal custody as required and no petition to determine custody of the child has been filed.</p> <p>TAKE NOTICE:</p> <p>3. The Michigan Adoption Code requires that the prosecuting attorney for the county where the child has been temporarily placed for adoption shall immediately file a petition in the circuit court to determine the custody of the child.</p> <p style="margin-top: 40px;">Date _____ Signature of clerk _____</p> <div style="border-top: 1px solid black; margin-top: 100px; padding-top: 5px; text-align: center;">Do not write below this line - For court use only</div>		
<b>PCA 334 (11/97) CLERK'S REPORT TO PROSECUTING ATTORNEY</b>		MCL 710.23d; MSA 27.3178(555.23d)

## Clerk's Report to Prosecuting Attorney 11/97 - PCA334

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 334 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
<i>In the matter of</i>	CASE	Name DOB	
<i>NOTE: Lines 1-3 will always print.</i>			
<i>Signature Lines</i>			

Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>ORDER TO</b> <b>DETERMINE CUSTODY OF CHILD</b> <b>TEMPORARILY PLACED FOR ADOPTION</b>	<b>FILE NO.</b>

In the matter of \_\_\_\_\_ DOB: \_\_\_\_\_  
Full name of child

1. Date of hearing: \_\_\_\_\_ Judge: \_\_\_\_\_ Bar no.

2. A petition to determine custody of the child has been filed.

3. Findings of fact and conclusions of law were made on the record.

**THE COURT FINDS:**

4. The child has been temporarily placed for adoption in the home of a prospective adoptive parent and the child:

☐ remains in this home.    ☐ has been removed from this home and is in the custody of the child placing agency.

☐ 5. It appears necessary that an investigation should be made to determine if a petition for a child protective proceeding should be filed in the family division of the circuit court.

☐ 6. A petition for the appointment of a guardian has been filed. Pending entry of an order of guardianship, a temporary order of disposition for the welfare of the child should be made.

7. The child    ☐ should    ☐ should not    be returned to the custody of the

☐ parent with authority for legal and physical custody of the child.

☐ guardian with authority for legal and physical custody of the child.

☐ child placing agency with legal custody of the child.

**IT IS ORDERED:**

☐ 8. The prospective adoptive parent(s), \_\_\_\_\_,   
Name(s)  
 shall within 24 hours of receipt of this order return the child to \_\_\_\_\_,   
Name(s)

☐ the parent who has the authority for legal and physical custody of the child.

☐ the guardian who has the authority for legal and physical custody of the child.

(PLEASE SEE OTHER SIDE)

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PCA 336 (11/97) **ORDER TO DETERMINE CUSTODY OF CHILD TEMPORARILY PLACED FOR ADOPTION**

MCL 710.23e; MSA 27.3178(555.23e)

## Order to Determine Custody of Child Temporarily Placed for Adoption 11/97 - PCA336

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 336 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
<i>NOTE: Lines 2-10 will always print to be manually entered by the user.</i>			
<i>Signature Lines</i>			



Approved, SCAO		
<b>STATE OF MICHIGAN</b> JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	<b>FINAL ORDER ALLOWING FEES AND COSTS</b>	<b>FILE NO.</b>
In the matter of adoptee _____ DOB: _____ <small style="margin-left: 100px;">Full name of child</small>		
1. Date of hearing: _____ Judge: _____ <div style="text-align: right;"><small>Bar no.</small></div>		
2. A petition for the adoption of the adoptee has been filed with the court.		
3. A verified accounting itemizing payments and disbursements, and updated as required by law, has been filed by the adopting parents.		
<input type="checkbox"/> 4. A verified statement of services and fees, updated as required by law, has been filed by the attorney for each adopting parent.		
<input type="checkbox"/> 5. A verified statement of services and fees, updated as required by law, has been filed by the attorney for each parent of the adoptee.		
<input type="checkbox"/> 6. A verified statement of services and fees, updated as required by law, has been filed by the child placing agency or the Michigan Family Independence Agency.		
<b>THE COURT FINDS:</b>		
7. The final order of adoption should be entered.		
8. The fees and costs should be allowed in whole or in part.		
<b>IT IS ORDERED:</b>		
9. Fees and costs are approved as follows:		
<input type="checkbox"/> a. Fees and costs of the attorney for petitioner are allowed as submitted except: _____ _____		
<input type="checkbox"/> b. Fees and costs of the attorney for the parent(s) are allowed as submitted except: _____ _____		
<input type="checkbox"/> c. Fees and costs of the child placing agency or Michigan Family Independence Agency are allowed as submitted except: _____ _____		
10. Payments or disbursements made or agreed upon by petitioner as itemized in the accounting are approved except: _____ _____		
Date _____	Judge _____	
Do not write below this line - For court use only		
<div style="display: flex; justify-content: space-between;"> <span>PCA 341 (9/97) <b>FINAL ORDER ALLOWING FEES AND COSTS</b></span> <span>MCL 710.54(10); MSA 27.3178(555.54)(10)</span> </div>		

## Final Order Allowing Fees and Costs 09/97 - PCA341

This order can be generated from an event ADD or MOD. From the event screen, enter the date of the hearing, the event type code and all data for the form. Enter 341 in the form number request field at the bottom of the screen and press <Enter>.

Line From the Order Form	Screen	Field	Codes
1. <i>In the matter of</i>	CASE	Name DOB	
2. <i>Date of hearing: Judge/Referee:</i>	EVENT	Date Jurist	
<i>NOTE: Lines 2-10 will always print to be manually entered by the user.</i>			
<i>Signature Lines</i>			